October 20, 2008

Public Service Commission
Docketing Department
101 Executive Center Drive
Columbia, South Carolina 29210

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Docket Number 2007-445-A

Members of the Public Service Commission:

As an ambulance provider in the upstate of South Carolina, I would like to voice my concerns with the proposed regulations for "stretcher vans." American TransMed has been delivering prehospital care to residents in South Carolina since 1997. During this time we have witnessed many changes in this industry, and we are open for change provided the quality of care is not sacrificed. We transport over 20,000 patients each year to hospitals, physician offices, dialysis clinics, and other medical facilities for the purpose of the patient to acquire proper medical treatment. In addition, we also provide wheelchair services for nursing homes and patients that do not require a stretcher for transportation.

Many times during the stretcher transports patient's conditions have deteriorated resulting in medical intervention by the EMT and or Paramedic. We feel the basic first aid requirement will not be enough to provide the medical care the patients need and deserve. The non-emergency patients that are being transported to medical facilities and physician offices are going for the purpose of medical care by a physician and many do require pre-hospital care enroute, sometimes just the simple administration of oxygen.

Oxygen is classified as a drug and it appears that you would like for the oxygen to be self administered aboard the "stretcher van." How will the individuals know how to operate the regulator and or know the time allowed before the oxygen cylinder is empty? This scenario happens multiple times during stretcher transports with patients requiring oxygen administration.

Ambulance's that are utilized currently in the state of South Carolina must meet the federal KKK specifications. These specifications are standards that not only have requirements for the space allocated but storage areas. One of the purposes of these standards is to make sure that if an accident occurs during transport the patient and the attendant are not injured due to poor construction of the vehicle. How will this be met in the "stretcher vans?"

Due to the present state of our economy the Medicaid brokerage system has brought forth cost cutting initiatives that have caused many patients to suffer, due to the transportation mode that the broker arranged. We feel that this will continue and even get much worse in denying patients the correct mode of medical transportation. We were a key player when the brokerage system was started over two years ago and have witnessed the cost cutting initiatives to save a dollar by transporting patients in wheelchairs that actually needed a stretcher with medical personnel aboard. This is why we decided it would be in our best interest to leave the Medicaid brokerage system, before we were forced to defend a major lawsuit due to inappropriate mode of transportation. There have been several ambulance providers in this state to follow us for the same reasons. In closing, I would like to thank you for allowing us to the opportunity to submit comments for the proposed "stretcher van." The safety and welfare of the patient must be put first and we do not feel the "stretcher van" concept is a safe transportation mode at the current time.

As stated earlier many of these patients have a medical condition, which is the primary reason for the stretcher transport. Hopefully, this concept will be investigated further and the patient's welfare will be considered the primary concern, not the value of the dollars saved.

Respectfully,

Greg B. Kirby

CEO/President American TransMed, Inc.